

DEPARTMENT OF BUSINESS DEVELOPMENT (DBD) 4TH ANNUAL COMMUNITY SMALL BUSINESS ENTERPRISE (CSBE) CONFERENCE

"PYRAMID TO SUCCESS IN THE 21ST CENTURY"

FRIDAY, APRIL 1, 2005 + 7:30 a.m. - 4:30 p.m.

Hilton Miami Airport Hotel • 5101 Blue Lagoon Drive • Miami, Florida

PLEASE FILL OUT ALL SECTIONS. FORM MUST BE SIGNED.

EXHIBITOR/ADVERTISEM PLEASE COPY AND COMPLETE MULTIPLE FO	MENT/REGIST DRMS IF REGISTERING MOI		
® COST FREE - LIMITI			
Contact Name:	Title:		
Company Name: (as it will appear on sign)			
Address:			
City:	State: Zip Code:		
Phone: Fax:	E-Mail:		
Address of Contact (if different from above):			
City:	State: Zip Code:		
(Exhibitors only)			
Briefly describe your product(s) or service:			
Exhibit Rates:	Advertisement R	ates – (Black a	nd White):
☐ Vendors Display Table - \$150	☐ Inside Front Cover	(8 ½ x 11)	\$600
Includes one (1) 6-ft. skirted table and two (2) chairs.	☐ Inside Back Cover	(8 ½ x 11)	\$600
☐ Vendors Display Booth - \$600	Outside Back Cover	(8 ½ x 11)	\$800
Includes one 10-ft. x 10-ft. exhibit booth area (the space will be	☐ Full Page	(8 ½ x 11)	\$400
carpeted) with a one (1) line exhibitor identification sign, one (1) 6-ft. skirted table, two (2) chairs, one (1) wastebasket and	Half Page	(8 ½ x 5 ½)	\$200
electricity (a single wall outlet).	● DEADLINE for ad copy is March 16, 2005. ★ All Ads must be in camera ready format. ★		
➤ DBD RESERVES THE RIGHT TO ARRANGE ALL ADS (EXCEPT PRESTIGE ADS)			
➤ PLEASE COMPLETE AND RE DEPARTMENT OF BUSINESS DEVELOP 111 N.W. FIRST STREET, 19 TH F TELEPHONE: (305) 375-3111 OR (305)	FLOOR • MIAMI, FLORIDA 33128	A S. THOMAS 8-1835	
➤ MAKE CHECK PAYABLE TO: BOARD OF COUNTY COMMISSIONERS			

Signature:

Date: _

Authorizing Representative: